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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission: 7

Application Number	09/855,804
Filing Date	May 16, 2001
First Named Inventor	Linda Ann Roberts
Art Unit	2665
Examiner Name	Jason E. Mattis
Attorney Docket Number	BS00337

**ENCLOSURES**

(Check all that apply)

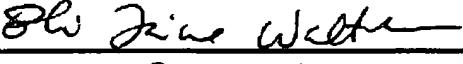
Fee Transmittal Form  
 Fee Attached  
 Amendment/Reply  
 After Final  
 Affidavits/declaration(s)  
 Extension of Time Request  
 Express Abandonment Request  
 Information Disclosure Statement  
 Certified Copy of Priority Document(s)  
 Response to Missing Parts/Incomplete Application  
 Response to Missing Parts under 37 CFR 1.52 or 1.53

Drawing(s)  
 Licensing-related Papers  
 Petition  
 Petition to Convert to a Provisional Application  
 Power of Attorney, Revocation  
 Change of correspondence Address  
 Terminal Disclaimer  
 Request for Refund  
 CD, Number of CD(s)

After Allowance Communication to Group  
 Appeal Communication to Board of Appeals and Interferences  
 Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  
 Proprietary Information  
 Status Letter  
 Other Enclosure(s) (please identify below):

Remarks:

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Name (Print/Type)	Bambi Faivre Walters	Reg. No.:	45,197
Signature			
Date	MARCH 30, 2006		

**CERTIFICATE OF TRANSMISSION / MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Name (Print/Type)	Maureen M. Pettine	Date	03/31/2006
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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re application of:	Linda Ann Roberts	Group Art Unit:	2665
Application No.:	09/855,804	Examiner:	Jason E. Mattis
Filed:	May 16, 2001	Docket No.:	BLS00337
Title:	"Priority Caller Alert"		

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**VIA FACSIMILE 571-273-8300**

Attn: Examiner Jason E. Mattis

**37 C.F.R. § 1.8 CERTIFICATE OF TRANSMISSION**

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on: 03/31/2006 (date of transmission).

Maureen M. Pettine  
Name of Person Faxing This Paper

Maureen M. Pettine

Signature

March 31, 2006

Date of Transmission

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**INFORMATION DISCLOSURE STATEMENT**

Pursuant to 37 CFR §§1.56, 1.97, and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached Form PTO 1449 (page 1). The references are as follows:

6,154,531	Clapper	11/28/2000
5,481,599	MacAllister, et al.	01/02/1996
2002/0016748	Emodi, Dan	02/07/2002

This Information Disclosure Statement is being submitted after the mailing of a first Office Action in this application and therefore, a certification fee is believed to be required (37 CFR § 1.97(b)(3)).

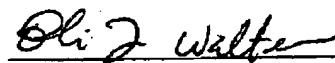
84/03/2886 MBINAS 08000007 09855884

01 FC:1886

180.00 0P

It is respectfully requested that the references listed on the attached forms be expressly considered by the Examiner and be made of record in the application and appear among the "References Cited" on any patent to issue therefrom.

Respectfully submitted,



Bambi F. Walters  
Attorney for Applicants  
Registration No. 45,197  
P. O. Box 5743  
Williamsburg, VA 23188  
Telephone: 757.253.5729

Date: MARCH 30, 2006

MAR 31 2006 11:59AM WALTERS &amp; ZIMMERMAN

757-253-5729 P.4  
MAR 31 2006

# FEET TRANSMITTAL

## for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Application Number	09/855,804
Filing Date	May 16, 2001
First Named Inventor	Linda Ann Roberts
Examiner Name	Jason E. Mattis
Art Unit	2665
Attorney Docket No.	BS00337

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>\$180.00</b>
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**METHOD OF PAYMENT (check all that apply)**

Check  Credit Card  Money Order  None  Other  
 Deposit Account  Deposit Account No. 19-2167

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 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**FEE CALCULATION**
**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Enty Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>
- 20 or HP =	x	=

HP=highest number of independent claims paid for, if greater than 3.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP=highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50	(round up) x	=

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supplemental IDS Fee 180.00

SUBMITTED BY:			Complete (if applicable)		
Name (Print/Type)	Bambi F. Walters	Registration No. (Attorney/Agent)	45,197	Telephone:	(757) 253-5729
Signature			Date	MARCH 30, 2006	

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757-253-5729 MAR 31 2006 P-5

# FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Application Number	09/855,804
Filing Date	May 16, 2001
First Named Inventor	Linda Ann Roberts
Examiner Name	Jason E. Mattis
Art Unit	2885
Attorney Docket No.	BS00337

**TOTAL AMOUNT OF PAYMENT** **\$180.00**

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Charge fee(s) indicated below, except for the filing fee

Credit any overpayments

#### FEE CALCULATION

##### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

##### 2. EXCESS CLAIM FEES

###### Fee Description

Each claim over 20 (including Reissues)

Fee (\$)

25

Each independent claim over 3 (including Reissues)

Fee (\$)

100

Multiple dependent claims

Multiple Dependent Claims

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**  
- 20 or HP = **x** **=**

Fee (\$)

180

HP=highest number of independent claims paid for, if greater than 3.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**  
- 3 or HP = **x** **=**

Fee (\$)

25

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Total Sheets **Extra Sheets** **Fee (\$)** **Fee Paid (\$)**  
- 100 = **/ 50** **(round up)** **x** **=**  
Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): **Supplemental IDS Fee** **180.00**

SUBMITTED BY:			Complete (if applicable)		
Name (Print/Type)	Bambi F. Walters	Registration No. (Attorney/Agent)	45,197	Telephone:	(757) 253-5729
Signature	<i>Bambi F. Walters</i>		Date	MAR 30, 2006	

Please type a plus sign (+) inside this box →

PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0851-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Substitute for form 1449A/PTO		Complete if Known	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>		Application Number	09/855,804
		Filing Date	May 16, 2001
		First Named Inventor	Linda Ann Roberts
		Group Art Unit	2665
		Examiner Name	Jason E. Mattis
		Attorney Docket Number	BS00337
Sheet	1	of	1

## U.S. PATENT DOCUMENTS

## OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

Examiner Signature		Date Considered	
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**EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.